

SOURCE WATER QUALITY CONDITIONS FOR UNFILTERED SYSTEMS ¹

Month _____
Year _____

Town _____
System/Treatment Plant _____
PWSID _____

COLIFORM MEASUREMENTS ²					TURBIDITY MEASUREMENTS	
DATE	NO. OF SAMPLES		NUMBER OF SAMPLES MEETING SPECIFIED LIMITS		MAXIMUM ³ TURBIDITY (NTU)	TURBIDITY ⁴ "EVENT" (YES OR NO)
	FECAL	TOTAL	FECAL (<=20/100 mL)	TOTAL(<=100/100 mL)		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
Total					Maximum daily turbidity= ____NTU Tot. No. of turb. "Events" = ____	

NOTES:

1. SAMPLES ARE TAKEN FROM THE SOURCE WATER IMMEDIATELY PRIOR TO THE FIRST DISINFECTION POINT INCLUDED IN THE CT DETERMINATION.
2. A FECAL OR TOTAL COLIFORM SAMPLE MUST BE TAKEN ON EACH DAY THAT THE SYSTEM OPERATES AND A SOURCE WATER TURBIDITY MEASUREMENT EXCEEDS 1 NTU.
3. FOR EACH DAY THAT THE MAXIMUM TURBIDITY EXCEEDS 5 NTU, THE DATE SHOULD ALSO BE ENTERED FOR THE DAY THAT THE STATE WAS NOTIFIED OF THIS EXCEEDANCE, E.G., "7.3-22 APR."
4. A "YES" RESPONSE IS REQUIRED EACH DAY THE MAXIMUM TURBIDITY EXCEEDS 5 NTU AND THE PREVIOUS DAY DID NOT. THIS IS INDICATIVE OF THE BEGINNING OF A TURBIDITY "EVENT." THE TOTAL # OF "YES" RESPONSES EQUALS THE NUMBER OF TURBIDITY "EVENT" IN THE MONTH.

THIS REPORT IS DUE AT THE DEP/DWP REG. OFFICE WITHIN 10 DAYS AFTER THE END OF THE MONTH